PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

50395-265

3-73-65												7	
CLAIMS AS FILED - PART I									ENTITY		OTHE	R THAN	
TOTAL CLAIMS			(Colur	(Column 1)		(Column 2)		PE [OR	SMALL		
500			-	۷				RATE	FEE	- .	RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		SIC FE	E 385.0	OR	BASIC FÉ	770.00	
TOTAL CHARGEABLE CLAIMS			5 11	5 minus 20= *		. 0		(\$ 9=	İ	OR	X\$18=		
INDEPENDENT CLAIMS				minus 3 =		0		(43=		OR	X86=		
М	ULTIPLE DEPE	NDENT CLAIM I	PRESENT	•				145=		OR	+290=		
• 1	f the differenc	e in column 1 is	s less than :	ess than zero, enter "0" in column 2			<u> </u>	OTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II							J 17 12		_ات				
		(Column 1)		(Column 2) (Column 3)				SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
		CLAIMS		HIGHE	ST		7 —		400	7 1		1	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
NON	Total		Minus	**		=	X	§ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	<u>. </u>	=	X	43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										 ``			
						•		45=		OR	+290=		
								TOTAL T. FEE		OR ,	TOTAL ADDIT, FEE		
		(Column 1)		(Colum		(Column 3)				_			
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AMENDMENT	Total	*	Minus	**		=	X\$	9=	<u> </u>	OR	X\$18=		
ME	Independent	*	Minus	***		= .	Y4	3=	•	1 1	X86=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT C	LAIM					OR	∧ 00=		
								 5= .		OR	+290=	•	
								OTAL FEE		OR A	TOTAL DDIT. FEE		
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ξ.	Total		24:-			 	1		LEE .	· -		FEE	
<u> </u>	Independent	*	Minus Minus	**		=	X\$	9=		OR	X\$18=		
₹ -		NTATION OF MU		PENDENT C		-	X43	3=		OR	X86=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR AL	TOTAL DIT. FEE		
Tr	ne "Highest Numl	ber Previously Paid	For (Total or	o orace is le Independent)	iss than is the h	s, enter "3." highest number i			opriate box				